



# RPU-5 Self-assessing Purchaser Worksheet

Do not write above this line.

## Read this information first

If you purchase electricity for nonresidential use and choose to register and pay the Electricity Excise Tax directly to the Illinois Department of Revenue, you must complete this worksheet and attach it to Form RPU-3, Utility Tax Application for Registration.

If, at a later date, you need to change any information contained in this worksheet (e.g., add or delete an account in Step 2), you must complete a new worksheet, indicate all

changes, and mail your new worksheet to the address in Step 3.

A photocopy of this form will be sent to each delivering supplier listed below. You must complete separate forms for each delivering supplier if you do not want all of your account information disclosed to each supplier.

If you have any questions, call our Springfield office weekdays between 8:00 a.m. and 4:30 p.m. at 217 524-5406 or 217 785-6602.

## Step 1: Identify your business

1 IBT no. \_\_\_\_\_  
Illinois business tax number

2 FEIN \_\_\_\_\_  
Federal employer identification number

3 Electricity Excise Tax certificate of registration number, if known.  
E - \_\_\_\_\_

4 Business name \_\_\_\_\_

5 Address  
\_\_\_\_\_  
Number and street  
\_\_\_\_\_  
City State ZIP

## Step 2: Identify your delivering suppliers and accounts

6 List the name and address of each of your delivering suppliers. Next to each delivering supplier, list the account numbers for which you choose to pay the Electricity Excise Tax directly to us. Additional space is provided on the back of this worksheet.

Delivering supplier

Name	Account numbers	Account numbers
_____	_____	_____
_____	_____	_____
Number and street	_____	_____
_____	_____	_____
_____	_____	_____
City State ZIP	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Delivering supplier

Name	Account numbers	Account numbers
_____	_____	_____
_____	_____	_____
Number and street	_____	_____
_____	_____	_____
_____	_____	_____
City State ZIP	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Step 3: Sign below

Under penalties of perjury, I state that I have examined this worksheet and, to the best of my knowledge, it is true, correct, and complete.

\_\_\_\_\_  
Signature of owner, partner, or officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed or printed name of person signing to the left

**Mail to:** Registration and Returns Processing, Illinois Department of Revenue, P.O. Box 19019, Springfield, IL 62794-9019

Step 2: Identify your delivering suppliers and accounts (continued)

Delivering supplier	Account numbers	Account numbers
Name		
Number and street		
City		
State		
ZIP		

Delivering supplier	Account numbers	Account numbers
Name		
Number and street		
City		
State		
ZIP		

Delivering supplier	Account numbers	Account numbers
Name		
Number and street		
City		
State		
ZIP		

Delivering supplier	Account numbers	Account numbers
Name		
Number and street		
City		
State		
ZIP		

